

Please type a plus sign (+) inside this box →



PTO/SB/05 (2/98)
Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR § 1.53(b))</small>	Attorney Docket No.	4015-5072
	First Inventor or Application Identifier	Jung-Fu Cheng
	Title	Adaptive Hybrid ARQ Algorithms
	Express Mail Label No.	EV 051923582 US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 36] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">— Descriptive title to the Invention— Cross References to Related Applications— Statement Regarding Fed sponsored R & D— Reference to Microfiche Appendix— Background of the Invention— Brief Summary of the Invention— Brief Description of the Drawings (if filed)— Detailed Description— Claim(s)— Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3]</p> <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies <p>ACCOMPANYING APPLICATION PARTS</p> <p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> *Small Entity <input type="checkbox"/> Statement filed in prior application, Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input checked="" type="checkbox"/> Other: Express Mail Certification</p> <p>*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</p>

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary statement:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____ / _____
Prior application information: Examiner: _____ Group/Art Unit: _____

18. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		24112	
		PATENT & TRADEMARK OFFICE	
		or <input type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)			
NAME			
ADDRESS			
CITY	STATE	ZIP CODE	
COUNTRY	TELEPHONE	FAX	

Name (Print/Type)	David E. Begnet	Registration No. (Attorney/Agent)	32,194
Signature		Date	July 22, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: **Cheng**

Serial No.:

Filed:

Title: **ADAPTIVE HYBRID ARQ ALGORITHMS**

Attorney's Docket No: 4015-5072

**EXPRESS MAIL CERTIFICATION
LABEL NO.: EV 051923582 USUS**

Raleigh, North Carolina
July 22, 2003

MS PATENT APPLICATION
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Sir:

EXPRESS MAIL CERTIFICATE LABEL NO.: EV 051923582 US

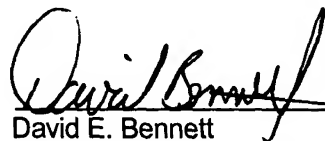
DATE MAILED: July 22, 2003

I hereby certify that the enclosed US Utility Patent Application Transmittal Form, Fee Transmittal Form (2 copies), specification and claims, drawings (4 sheets), Declaration and Power of Attorney, Assignment and Recordation Sheet, and our check number 09681 in the amount of \$2470 are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted,

COATS & BENNETT, P.L.L.C.

By:



David E. Bennett
Registration No. 32,194

Telephone: (919) 854-1844

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1

These are the fees effective December 29, 1999.

Small Entity payments must be supported by a small entity statement.

Otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

Complete if Known

Application Number	TBA
Filing Date	July 22, 2003
First Named Inventor	Jung-Fu Cheng
Examiner Name	TBA
Group Art Unit	TBA
Attorney Docket No.	4015-5072

TOTAL AMOUNT OF PAYMENT (\$2470.00)

METHOD OF PAYMENT (check one)

1. ☒ The Commission is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 18-1167

Deposit Account Name Coats & Bennett, P.L.L.C.

- ☒ Charge Any Additional Fee Required Under 37 CFR §§1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR §1.18 at the Mailing of the Notice of Allowance

2. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	750	201	345	Utility filing fee	750.00
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	760	208	380	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)					(\$750.00)

2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	90	-20** = 70 X 18.00 =	1260.
Independent Claims	8	-3** = 5 X 84.00 =	420.
Multiple Dependent Claims		X =	

** or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim
109	78	209	39	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$1680.00)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

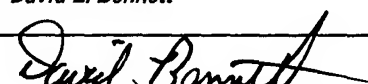
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examination action	
115	110	215	55	Extension for reply within first month	
116	380	216	190	Extension for reply within second month	
117	870	217	435	Extension for reply within third month	
118	1,360	218	680	Extension for reply within fourth month	
128	1,850	228	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,210	241	605	Petition to revive - unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt.	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	760	246	380	Filing a submission after final rejection (37 CFR 1.129(a))	
149	760	249	380	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify) _____

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$40.00)

SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	David E. Bennett			Reg. Number	32,194
Signature				Deposit Account User ID	18-1167
	Dat	July 22, 2003			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.